

*Baths and Bathing: A Book for Everybody.* By JOSEPH FARRAR, L.R.C.P. Ed. Fourth Edition. Bristol: John Wright & Co. 1890.

THIS is a most interesting and instructive little book, suitable for the general reader. In addition to full information with regard to the different kinds of baths, and the rules to be observed in bathing, it contains a most instructive historical retrospect beginning with the statement contained in the second chapter of Exodus, fifth verse, that "The daughter of Pharaoh came down to wash herself at the river." We would advise all our readers to lay out a shilling and procure the book—it would be money well spent.

*Introduction to the Treatment of Disease by Galvanism.* By SKENE KEITH, M.B., F.R.C.S. Ed., late Special Assistant Surgeon, Royal Infirmary, Edinburgh. London: Truslove & Shirley.

THIS little book comprises within its 62 pages much information on the subject of which it treats. The matter is very elementary, but it seems to the writer that no one will be able to read the book and fail to thoroughly grasp the rudimentary principles of electricity, a knowledge of which is becoming daily of greater importance to the general practitioner. The last chapter treats of Electrolysis, upon which Dr. Keith is well entitled to speak. To those commencing a study of electricity this little work can be strongly recommended.

## MEETINGS OF SOCIETIES.

### GLASGOW PATHOLOGICAL AND CLINICAL SOCIETY.

SESSION 1889-90.

MEETING VIII.—12TH MAY, 1890.

*The President, PROFESSOR GAIRDNER, in the Chair.*

#### I.—INTESTINAL STRANGULATION BY A BAND.

A fresh specimen illustrative of this condition was shown by Professor Buchanan and Dr. Rutherford. The band was

formed by the adhesion, apparently of old standing, of a point on the free margin of the omentum to the root of the mesentery, close to the ileo-colic junction. The patient was a boy aged 8, with no other evidences of precedent inflammatory changes in the peritoneum. Symptoms were of rather under 5 days' duration.

II.—DR. JOSEPH COATS showed—

1. Two aneurisms of the aorta, showing the mode of rupture into the trachea, and one showing pressure on the pneumogastric with gangrene of lung.

An account of these cases by Professor Gairdner and Dr. Coats will appear as a separate article in an early number of the *Glasgow Medical Journal*.

2. Cancer of terminal part of common bile duct; distension of ducts and gall-bladder; rupture of gall-bladder; biliary peritonitis.

An account of this case by Dr. Finlayson and Dr. Coats appeared in the *Glasgow Medical Journal* for August (p. 84).

3. (a) Case of fatty tumour inside a rib; (b) Angioma of liver; (c) Ovarian tumour attached to great omentum, and with twisted pedicle.

A description of these specimens, with drawings of *a* and *c*, has already appeared in the *Glasgow Medical Journal* for August (p. 81).

III.—DR. COATS and DR. FINLAYSON showed—

Cancer of the œsophagus with secondary tumours in the vertebræ; involvement of recurrent laryngeal.

For full account of this case see *Glasgow Medical Journal* for September (p. 161).

IV.—CASE OF ACUTE DEMENTIA TREATED BY HEAT AND ELECTRICITY APPLIED TO THE HEAD.

By ALEXANDER ROBERTSON, M.D.

Dr. Alexander Robertson showed a patient who had recovered from this form of mental disease. She is 20 years of age, a linen presser to occupation, and had been admitted to the Infirmary on 10th January, 1890. She was of a retiring disposition when well, and very much given to reading when free from work. Menstruation had been regular up till time of illness. This was of about two months' standing, and no definite cause was known; no tendency to insanity in the family. There was some excite-



ment with hallucinations at the beginning of the disorder, but after a few days she had passed into a state of much mental degradation. She was of filthy habits, and required to be fed by nurse. She was quite passive in every respect. There was marked emaciation; heart's action was very weak, with a very feeble pulse, and there was coldness and blueness of the extremities. Temperature was generally  $1^{\circ}$  F., subnormal. Her tongue was coated, and there was sores about the mouth.

The treatment was, in the first instance, directed to stimulation and support of the general system. Fluid food and brandy were administered at short intervals night and day. Care was taken to keep the bowels free, both by stimulating enemata and laxatives by the mouth. She improved a little under this treatment, but this improvement was so slight that the propriety of sending her to a lunatic asylum was carefully considered about three weeks after admission. It was, however, determined to try the effect of direct stimulating applications to the brain. So, on 1st February, heat was ordered to be applied to the head by the "water-cap" (which was shown to the meeting) for an hour daily at  $110^{\circ}$  Fahr. This was continued for about a fortnight, and then the temperature of the water was gradually reduced during the second half of the hour, till only ice-water was circulated; and this was continued for twenty minutes. On the 20th February there was distinct improvement; she took her food herself, and showed more mental activity in other respects. From an early stage of the treatment friction to the surface was employed, but now systematic massage for three-quarters of an hour morning and evening was commenced, the heat and cold to the head being discontinued. After three weeks of the treatment by massage she had further improved in every way, but even then she had not become quite correct in her habits. At this time she gave slow and correct answers to two or three simple questions—such as telling her name and residence. The massage was now stopped, and the continuous current to the head was begun, and continued during the next month till 21st April. The application was made every second day, and the strength of the current was 4 milliamperes, but only two for the first two days. The positive pole was applied to the lower part of the spine, and the negative was slowly moved over the head. In about a fortnight she had become perfectly correct in her habits, was talking intelligently, and assisting in the maid-work. Her mind, however, seemed a little slow, though this appear-

ance might be due to her natural diffidence. She had gained 2 stones, 4 lbs. in weight.

Dr. Robertson said that there was no distinct improvement under general stimulation of the system, and this did not clearly begin till after the local applications to the head. The case, he said, so far as treatment and its results were concerned, corresponded with one of catalepsy which had been shown to the Medico-Chirurgical Society some years since. Heat and cold, followed by electricity, had been used in that case. Dr. Robertson also said there was a special interest in the treatment of a patient with mental disease in a general hospital at present, owing to the late discussion in the London County Council on the projected hospital for the treatment of acute insanity in London.

V.—PROFESSOR GAIRDNER showed specimens from a case of cystic transformation of the kidneys and liver.

The report of this case, and description of the specimens, will appear in an early number of the *Glasgow Medical Journal*.

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## ABSTRACTS FROM CURRENT MEDICAL LITERATURE.

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### PHYSIOLOGY.

By WILLIAM SNODGRASS, M.A., M.B.

**Biliary Secretion.**—Mr. A. W. Robson has published "Observations on the Secretion of Bile in a Case of Biliary Fistula" in *Proceedings of the Royal Society*, vol. xlvii, No. 291. His general conclusions are—

1. The bile is chiefly excrementitious, and, like the urine, is constantly being formed and cast out.
2. Though the bile probably assists in the absorption of fats, its presence in the intestine is not necessary for the digestion of such an amount of fat as is capable of supporting life and keeping up nutrition.
3. Increase in body weight and good health are quite compatible with the entire absence of bile from the intestines.
4. The antiseptic properties of the bile are unimportant.
5. Whatever little antiseptic quality bile may have is probably derived from its admixture with the gall-bladder fluid.
6. The supposed stimulating effect of the bile on the intestinal wall is not necessary for a regular action of the bowels.
7. The quantity of bile excreted in the 24 hours during health in a person of average weight may vary between 39 oz. 4 drs. and 25 oz. 6 drs., with an average of 30 oz. less the  $2\frac{1}{2}$  oz. of fluid secreted by the gall-bladder.
8. More bile is excreted during the day than at night, the excess varying between 5 oz. and 3 drs.